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(FILE 'HOME' ENTERED AT 14:45:32 ON 08 OCT 2003)

FILE 'CAPLUS, CAOLD, MEDLINE, BIOSIS' ENTERED AT 14:46:13 ON 08 OCT 2003

E COHEN ELI/AU

L1 16 S E3
L2 14 DUP REMOV L1 (2 DUPLICATES REMOVED)
E NAVICKAS IRENE A/AU
L3 3 S E1 OR E3
E COHEN BENJAMIN M/AU
L4 1 S E3
E ROBINSON BARRY N/AU
L5 14 S E2-E3
L6 13 DUP REMOV L5 (1 DUPLICATE REMOVED)
L7 20219 S BLOOD AND HEMOSTASIS
L8 70 S L7 AND NETWORK
L9 1 S L8 AND COMPUTER?
L10 0 S L8 AND INTERNET
L11 2 S L8 AND ALGORITHM
L12 180019 S BLOOD AND (COAGULAT? OR AGGLUTINAT? OR CLOT?)
L13 661 S L12 AND NETWORK
L14 2 S L13 AND INTERNET
L15 1 S L13 AND WIRELESS
L16 1444 S L12 AND HAEMOSTASIS
L17 7 S L16 AND NETWORK
L18 6 DUP REMOV L17 (1 DUPLICATE REMOVED)
L19 1 S L16 AND INTERNET
L20 0 S L16 AND WIRELESS
L21 6 S L16 AND INTERFACE
L22 3 DUP REMOV L21 (3 DUPLICATES REMOVED)
L23 2 S L12 AND COMMUNICATION NETWORK
L24 7 S L7 AND WEB
L25 6 DUP REMOV L24 (1 DUPLICATE REMOVED)
L26 81 S L12 AND WEB
L27 9 S L26 AND COMPUTER?
L28 6 DUP REMOV L27 (3 DUPLICATES REMOVED)

FILE 'STNGUIDE' ENTERED AT 15:21:19 ON 08 OCT 2003

FILE 'CAPLUS, CAOLD, MEDLINE, BIOSIS' ENTERED AT 15:29:54 ON 08 OCT 2003

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L28 ANSWER 5 OF 6 MEDLINE on STN

DUPLICATE 1

AN 2000211166 MEDLINE

DN 20211166 PubMed ID: 10747318

TI A **web**-based teaching program for laboratory diagnosis of **coagulation** disorders.

AU Nguyen A N; Uthman M O; Johnson K A

CS Departments of Pathology and Laboratory Medicine, University of Texas Health Science Center at Houston, Houston, Texas 77030, USA.

SO ARCHIVES OF PATHOLOGY AND LABORATORY MEDICINE, (2000 Apr) 124 (4) 588-93. Journal code: 7607091. ISSN: 0003-9985.

CY United States

DT Journal; Article; (JOURNAL ARTICLE)

LA English

FS Abridged Index Medicus Journals; Priority Journals

EM 200005

ED Entered STN: 20000613

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Entered Medline: 20000531

AB OBJECTIVE: To implement an interactive program for teaching **coagulation** disorders on the World Wide **Web**. DESIGN AND RESULTS: The core materials in this program were derived from a personal **computer** software program previously designed by the authors. Three modules were developed in this program: (1) a **coagulation** profile to display typical results of **coagulation** screening tests for each disorder; (2) a differential diagnosis module to generate a list of diagnoses that fit the test results in a given case; and (3) a synopsis of coagulopathy and therapy to provide essential information on disorders and therapeutic options. A total of 41 **coagulation** disorders were included in the knowledge base. CONCLUSIONS: Since the World Wide **Web** is increasingly more accessible to **computer** users, it has become an ideal medium for teaching purposes. Our experience with this program in teaching medical students and pathology residents at our institution has been very encouraging.

L28 ANSWER 4 OF 6 BIOSIS COPYRIGHT 2003 BIOLOGICAL ABSTRACTS INC. on STN

AN 2002:186940 BIOSIS

DN PREV200200186940

TI ADVVOY.comTM: An internet platform for hemophilia patient care.

AU Valentino, Leonard A. (1); Abshire, Thomas C.; Manco-Johnson, Marilyn J.; Wicklund, Brian M.

CS (1) Pediatrics, Rush University, Chicago, IL USA

SO Blood, (November 16, 2001) Vol. 98, No. 11 Part 1, pp. 429a.

<http://www.bloodjournal.org/>. print.

Meeting Info.: 43rd Annual Meeting of the American Society of Hematology, Part 1 Orlando, Florida, USA December 07-11, 2001

ISSN: 0006-4971.

DT Conference

LA English

AB ADVVOY.com is a secure Internet platform that was designed to facilitate and enhance patient communication with healthcare providers (HCP). The website captures all necessary clinical data including home treatment information for patients with hemophilia. Hemophilia is a chronic, life-long bleeding disorder due to the deficiency of **blood coagulation** protein factor VIII or IX. Bleeding is frequently into joints and soft tissues. In order to avoid chronic complications due to recurrent bleeding, treatment including intravenous infusion of antihemophilic factor concentrates, occurs in the patient's home. Home therapy is usually monitored by infrequent telephone calls and rare (annual or semi-annual) face-to-face visits of the patient to the hemophilia treatment center (HTC). Often, there are long delays in identification of target joint bleeding or other complications that might have been amenable to intervention if the HCP were aware of the clinical events and treatment history of the patient. The Internet offers patients the opportunity to transfer clinical information to HCPs and in turn HCPs can evaluate the data and communicate with the patient. ADVVOY.com is an Internet platform designed to facilitate timely patient-HCP communication. Data entry by patients or parents is easily accomplished by point and click and drop-down menus. A number of alerts can be configured to notify HCPs of deviations from the treatment plan. The clinical circumstances relative to each treatment entry can be recorded in the electronic medical record. Tabular reports and graphs are automatically created and can be viewed in the patient record to assist HCPs in evaluating the current treatment plan. The ADVVOY.com pilot study enrolled 10 patients with hemophilia A from 4 HTCs in the United States to answer three questions: 1) Can electronic data be captured? 2) Is the electronic data superior to conventional paper treatment logs? 3) What is the impact of timely, electronic communication on patient quality of life? The data presented in this abstract address the first question of data capture. A total of 218 data log entries (4.4 entries/patient/month) were made in five months into individual secure Internet **web** files and accounted for 607,969 units of anti-hemophilic factor concentrate infused. There were 50 entries for acute bleeding events, 18 for follow-up infusions and 150 for prophylaxis infusions. Signs and symptoms reported included: warmth (32 entries), limited range of motion (32), swelling (26), visible bleeding (8) and bruising (5). In summary, the Internet and ADVVOY.com: 1) can be used by patients to log treatment events including the signs and symptoms related to bleeding and 2) provides timely information to healthcare providers. The implementation of electronic data communication will likely enhance patient care and improve patient satisfaction.

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